# House File 726 - Introduced

HOUSE FILE 726
BY COMMITTEE ON HUMAN
RESOURCES

(SUCCESSOR TO HF 549)

# A BILL FOR

- 1 An Act relating to certain health and human services-related
- 2 entities including membership, reimbursement, and the
- 3 elimination or combining of such entities.
- 4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 DIVISION I

- 2 IOWA COLLABORATIVE SAFETY NET PROVIDER NETWORK
- 3 Section 1. Section 135.24, subsection 7, paragraph e, Code
- 4 2019, is amended to read as follows:
- 5 e. "Specialty health care provider office" means the
- 6 private office or clinic of an individual specialty health
- 7 care provider or group of specialty health care providers as
- 8 referred by the Iowa collaborative safety net provider network
- 9 established in section 135.153, but does not include a field
- 10 dental clinic, a free clinic, or a hospital.
- 11 Sec. 2. Section 135.159, subsection 1, paragraph h, Code
- 12 2019, is amended by striking the paragraph.
- 13 Sec. 3. REPEAL. Section 135.153, Code 2019, is repealed.
- 14 DIVISION II
- 15 HOSPITAL HEALTH CARE ACCESS TRUST FUND BOARD
- 16 Sec. 4. Section 249M.4, Code 2019, is amended to read as
- 17 follows:
- 18 249M.4 Hospital health care access trust fund board.
- 19 1. A hospital health care access trust fund is created
- 20 in the state treasury under the authority of the department.
- 21 Moneys received through the collection of the hospital health
- 22 care access assessment imposed under this chapter and any
- 23 other moneys specified for deposit in the trust fund shall be
- 24 deposited in the trust fund.
- 25 2. Moneys in the trust fund shall be used, subject to
- 26 their appropriation by the general assembly, by the department
- 27 to reimburse participating hospitals the medical assistance
- 28 program upper payment limit for inpatient and outpatient
- 29 hospital services as calculated in this section. Following
- 30 payment of such upper payment limit to participating hospitals,
- 31 any remaining funds in the trust fund on an annual basis may be
- 32 used for any of the following purposes:
- 33 a. To support medical assistance program utilization
- 34 shortfalls.
- 35 b. To maintain the state's capacity to provide access to and

- 1 delivery of services for vulnerable Iowans.
- 2 c. To fund the health care workforce support initiative
- 3 created pursuant to section 135.175.
- 4 d. To support access to health care services for uninsured 5 Iowans.
- 6 e. To support Iowa hospital programs and services which 7 expand access to health care services for Iowans.
- 8 3. The trust fund shall be separate from the general fund
- 9 of the state and shall not be considered part of the general
- 10 fund. The moneys in the trust fund shall not be considered
- 11 revenue of the state, but rather shall be funds of the hospital
- 12 health care access assessment program. The moneys deposited
- 13 in the trust fund are not subject to section 8.33 and shall not
- 14 be transferred, used, obligated, appropriated, or otherwise
- 15 encumbered, except to provide for the purposes of this chapter.
- 16 Notwithstanding section 12C.7, subsection 2, interest or
- 17 earnings on moneys deposited in the trust fund shall be
- 18 credited to the trust fund.
- 19 4. The department shall adopt rules pursuant to chapter
- 20 17A to administer the trust fund and reimbursements and
- 21 expenditures as specified in this chapter made from the trust
- 22 fund.
- 23 5. a. Beginning July 1, 2010, or the implementation date
- 24 of the hospital health care access assessment program as
- 25 determined by receipt of approval from the centers for Medicare
- 26 and Medicaid services of the United States department of health
- 27 and human services, whichever is later, the department shall
- 28 increase the diagnostic related groups and ambulatory patient
- 29 classifications base rates to provide payments to participating
- 30 hospitals at the Medicare upper payment limit for the fiscal
- 31 year beginning July 1, 2010, calculated as of July 31, 2010.
- 32 Each participating hospital shall receive the same percentage
- 33 increase, but the percentage may differ depending on whether
- 34 the basis for the base rate increase is the diagnostic related
- 35 groups or ambulatory patient classifications.

- 1 b. The percentage increase shall be calculated by dividing
- 2 the amount calculated under subparagraph (1) by the amount
- 3 calculated under subparagraph (2) as follows:
- 4 (1) The amount under the Medicare upper payment limit for
- 5 the fiscal year beginning July 1, 2010, for participating
- 6 hospitals.
- 7 (2) The projected expenditures for participating hospitals
- 8 for the fiscal year beginning July 1, 2010, as determined by
- 9 the fiscal management division of the department, plus the
- 10 amount calculated under subparagraph (1).
- 11 6. For the fiscal year beginning July 1, 2011, and for
- 12 each fiscal year beginning July 1, thereafter, the payments to
- 13 participating hospitals shall continue to be calculated based
- 14 on the upper payment limit as calculated for the fiscal year
- 15 beginning July 1, 2010.
- 16 7. Reimbursement of participating hospitals shall
- 17 incorporate the rebasing process for inpatient and outpatient
- 18 services for state fiscal year 2012. However, the total amount
- 19 of increased funding available for reimbursement attributable
- 20 to rebasing shall not exceed four million five hundred thousand
- 21 dollars for state fiscal year 2012 and six million dollars for
- 22 state fiscal year 2013.
- 23 8. Any payments to participating hospitals under this
- 24 section shall result in budget neutrality to the general fund
- 25 of the state.
- 26 9. a. A hospital health care access trust fund board is
- 27 established consisting of the following members:
- 28 (1) The co-chairpersons and the ranking members of the joint
- 29 appropriations subcommittee on health and human services.
- 30 (2) The Iowa medical assistance program director.
- 31 (3) Two hospital executives representing the two largest
- 32 private health care systems in the state.
- 33 (4) The president of the Iowa hospital association.
- 34 (5) A representative of a consumer advocacy group, involved
- 35 in both state and national initiatives, that provides data on

- 1 key indicators of well-being for children and families in order
- 2 to inform policymakers to help children and families succeed.
- 3 b. The board shall do all of the following:
- 4 (1) Provide oversight of the trust fund.
- 5 (2) Make recommendations regarding the hospital health care
- 6 access assessment program, including recommendations regarding
- 7 the assessment calculation, assessment amounts, payments to
- 8 participating hospitals, and use of the moneys in the trust
- 9 fund.
- 10 (3) Submit an annual report to the governor and the general
- 11 assembly regarding the use and expenditure of moneys deposited
- 12 in the trust fund.
- 13 c. The department shall provide administrative assistance
- 14 to the board.
- 15 DIVISION III
- 16 ADVISORY COMMITTEE TO THE CENTER FOR RURAL HEALTH AND PRIMARY
- 17 CARE
- 18 Sec. 5. Section 135.107, subsection 5, Code 2019, is amended
- 19 by striking the subsection.
- Sec. 6. Section 262.78, subsection 3, Code 2019, is amended
- 21 to read as follows:
- 22 3. The president of the university of Iowa, in consultation
- 23 with the president of Iowa state university of science and
- 24 technology, shall employ a full-time director of the center.
- 25 The center may employ staff to carry out the center's purpose.
- 26 The director shall coordinate the agricultural health and
- 27 safety programs of the center. The director shall regularly
- 28 meet and consult with the advisory committee to the center for
- 29 rural health and primary care. The director shall provide
- 30 the board of regents with relevant information regarding the
- 31 center.
- 32 DIVISION IV
- 33 GOVERNMENTAL PUBLIC HEALTH ADVISORY COUNCIL
- 34 Sec. 7. Section 135A.2, subsection 2, Code 2019, is amended
- 35 by striking the subsection.

- 1 Sec. 8. Section 135A.9, subsection 1, Code 2019, is amended
- 2 by striking the subsection.
- 3 Sec. 9. REPEAL. Section 135A.4, Code 2019, is repealed.
- 4 DIVISION V
- 5 PATIENT-CENTERED HEALTH ADVISORY COUNCIL
- 6 Sec. 10. REPEAL. Section 135.159, Code 2019, is repealed.
- 7 DIVISION VI
- 8 COMBINING STATE MEDICAL EXAMINER ADVISORY COUNCIL WITH THE
- 9 INTERAGENCY COORDINATING COUNCIL
- 10 Sec. 11. Section 691.6B, Code 2019, is amended to read as
- 11 follows:
- 12 691.6B Interagency coordinating council.
- 13 1. An interagency coordinating council is created to advise
- 14 do all of the following:
- 15 a. Advise and consult with the state medical examiner on a
- 16 range of issues affecting the organization and functions of the
- 17 office of the state medical examiner and the effectiveness of
- 18 the medical examiner system in the state.
- 19 b. Advise the state medical examiner concerning the
- 20 assurance of effective coordination of the functions and
- 21 operations of the office of the state medical examiner with the
- 22 needs and interests of the departments of public safety and
- 23 public health.
- 24 2. Members of the interagency coordinating council shall
- 25 include the all of the following:
- 26 a. The state medical examiner, or when the state medical
- 27 examiner is not available, the deputy state medical examiner;
- 28 <del>the</del>.
- 29 b. The commissioner of public safety or the commissioner's
- 30 designee; the.
- 31 c. The director of public health or the director's designee;
- 32 and the.
- 33 d. The governor or the governor's designee.
- 34 e. Representatives from the office of the attorney general,
- 35 the Iowa county attorneys association, the Iowa medical

1 society, the Iowa association of pathologists, the Iowa 2 association of medical examiners, the statewide emergency 3 medical system, and the Iowa funeral directors association. The interagency coordinating council shall meet on 5 a regular basis, and shall be organized and function as established by the state medical examiner by rule. 7 Sec. 12. REPEAL. Section 691.6C, Code 2019, is repealed. 8 DIVISION VII 9 TOBACCO USE PREVENTION AND CONTROL COMMISSION - MEMBERSHIP -10 MEETINGS - EXPENSES Section 142A.3, subsection 6, Code 2019, is amended 11 Sec. 13. 12 to read as follows: 6. Citizen members shall be reimbursed for actual and 13 14 necessary expenses incurred in performance of their duties. 15 Citizen members shall be paid a per diem as specified in 16 section 7E.6. Legislative members are eligible for per diem 17 and expenses as provided in section 2.10. 18 Sec. 14. Section 142A.3, subsection 9, Code 2019, is amended 19 to read as follows: 20 The commission shall elect a chairperson from among its 21 voting members and may select other officers from among its 22 voting members, as determined necessary by the commission. 23 The commission shall meet regularly no more than quarterly as 24 determined by the commission, upon the call of the chairperson, 25 or upon the call of a majority of the voting members. 26 Sec. 15. TOBACCO USE PREVENTION AND CONTROL COMMISSION -27 MEMBERSHIP REDUCTION. The tobacco use prevention and control 28 commission shall evaluate the membership of the commission 29 and shall submit to the department of public health the 30 commission's recommendation, to be included in departmental 31 legislation submitted for the 2020 legislative session, to 32 reduce the number of voting members from nine to seven members. 33 DIVISION VIII

Sec. 16. Section 147A.24, subsection 2, Code 2019, is

TRAUMA SYSTEM ADVISORY COUNCIL

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- 1 amended to read as follows:
- 2. The council shall consist of seven members to be
- 3 appointed by the director from the recommendations of
- 4 the organizations in subsection 1 for terms of two years.
- 5 Vacancies on the council shall be filled for the remainder of
- 6 the term of the original appointment. Members whose terms
- 7 expire may be reappointed.
- 8 Sec. 17. TRANSITION PROVISIONS. Notwithstanding any
- 9 provision of section 147A.24, subsection 2, to the contrary, a
- 10 member of the trauma system advisory council on July 1, 2019,
- 11 shall continue serving until the expiration of that member's
- 12 term or until a vacancy occurs prior to the expiration of the
- 13 applicable term, and such vacancy shall only be filled to the
- 14 extent consistent with and necessary to maintain the total
- 15 number of members of the council specified in section 147A.24,
- 16 subsection 2, as amended in this Act.
- 17 DIVISION IX
- 18 TELECONFERENCE OPTION FOR STATE ENTITIES
- 19 Sec. 18. NEW SECTION. 135.11B Statutory board, commission,
- 20 committee, or council of committee teleconference option.
- 21 Any statutorily established board, commission, committee, or
- 22 council established under the purview of the department shall
- 23 provide for a teleconference option for board, commission,
- 24 committee, or council members to participate in official
- 25 meetings.
- 26 DIVISION X
- 27 ELIMINATION OF PAYMENT OF EXPENSES FOR PUBLIC MEMBERS OF
- 28 CERTAIN STATE ENTITIES
- 29 Sec. 19. Section 105.3, subsection 6, Code 2019, is amended
- 30 by striking the subsection.
- 31 Sec. 20. Section 135.43, subsection 2, unnumbered paragraph
- 32 1, Code 2019, is amended to read as follows:
- 33 The membership of the review team is subject to the
- 34 provisions of sections 69.16 and 69.16A, relating to political
- 35 affiliation and gender balance. Review team members who

- 1 are not designated by another appointing authority shall be
- 2 appointed by the state medical examiner. Membership terms
- 3 shall be for three years. A membership vacancy shall be filled
- 4 in the same manner as the original appointment. The review
- 5 team shall elect a chairperson and other officers as deemed
- 6 necessary by the review team. The review team shall meet upon
- 7 the call of the state medical examiner or as determined by
- 8 the review team. The members of the team are eligible for
- 9 reimbursement of actual and necessary expenses incurred in the
- 10 performance of their official duties. The review team shall
- 11 include the following:
- 12 Sec. 21. Section 135.62, subsection 2, paragraph e, Code
- 13 2019, is amended by striking the paragraph.
- 14 Sec. 22. Section 147A.3, Code 2019, is amended to read as
- 15 follows:
- 16 147A.3 Meetings of the council quorum expenses.
- 17 Membership, terms of office, and quorum, and expenses shall
- 18 be determined by the director pursuant to chapter 135.
- 19 Sec. 23. Section 256I.3, subsection 3, Code 2019, is amended
- 20 by striking the subsection.
- 21 DIVISION XI
- 22 ELIMINATION OF CHILD WELFARE ADVISORY COMMITTEE, CHILD
- 23 SUPPORT ADVISORY COMMITTEE, CHILDREN'S MENTAL HEALTH WAIVER
- 24 IMPLEMENTATION COMMITTEE, AND PROPERTY TAX RELIEF FUND RISK
- POOL.
- Sec. 24. Section 217.3A, subsection 1, Code 2019, is amended
- 27 to read as follows:
- 28 1. General. The council on human services shall establish
- 29 and utilize the advisory committees committee identified in
- 30 this section and may establish and utilize other advisory
- 31 committees. The council shall establish appointment
- 32 provisions, membership terms, operating guidelines, and other
- 33 operational requirements for committees established pursuant to
- 34 this section.
- 35 Sec. 25. Section 217.3A, subsections 3 and 4, Code 2019, are

- 1 amended by striking the subsections.
- 2 Sec. 26. Section 426B.5, subsection 1, Code 2019, is amended
- 3 by striking the subsection.
- 4 Sec. 27. 2005 Iowa Acts, chapter 117, section 4, subsection
- 5 3, is amended by striking the subsection.
- 6 EXPLANATION
- 7 The inclusion of this explanation does not constitute agreement with
- 8 the explanation's substance by the members of the general assembly.
- 9 This bill eliminates or combines certain health and human
- 10 services-related entities and makes other changes relating to
- 11 health and human services-related entities.
- 12 Division I repeals Code section 135.153 (Iowa collaborative
- 13 safety net provider network established) thereby eliminating
- 14 the network. The bill also makes conforming changes to
- 15 eliminate references to the network in Code section 135.24
- 16 (volunteer health care provider program established —
- 17 immunity from civil liability) and Code section 135.159
- 18 (patient-centered health advisory council).
- 19 Division II eliminates the hospital health care access trust
- 20 fund board by striking the language establishing the board in
- 21 Code section 249M.4 (hospital health care access trust fund -
- 22 board).
- 23 Division III eliminates the advisory committee to the center
- 24 for rural health and primary care (Code section 135.107(5)) and
- 25 makes conforming changes.
- 26 Division IV eliminates the governmental public health
- 27 advisory council (Code section 135A.4) and makes conforming
- 28 changes.
- 29 Division V eliminates the patient-centered health advisory
- 30 council (Code section 135.159).
- 31 Division VI combines the state medical examiner advisory
- 32 council with the interagency coordinating council (Code
- 33 sections 691.6B and 691.6C).
- 34 Division VII limits the number of meetings of the tobacco use
- 35 prevention and control commission to no more than quarterly,

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- 1 eliminates reimbursement for the citizen members, and directs
- 2 the commission to evaluate the membership of the commission and
- 3 make a recommendation to the department of public health to
- 4 reduce the voting membership from nine to seven members.
- 5 Division VIII limits the membership of the trauma system
- 6 advisory council to seven members selected from a listing of
- 7 organizations, and includes membership transition provisions.
- 8 Division IX requires any statutorily established board,
- 9 commission, committee, or council under the purview of the
- 10 department of public health to provide for a teleconference
- 11 option for board, commission, committee, or council members to
- 12 participate in official meetings.
- Division X eliminates payment of compensation or expenses,
- 14 as applicable, of public members of the child death review
- 15 team, the early childhood Iowa state board, the emergency
- 16 management services advisory council, the health facilities
- 17 council, and the plumbing and mechanical systems board.
- Division XI eliminates the child welfare advisory committee,
- 19 the child support advisory committee, the children's mental
- 20 health waiver implementation committee, and the property tax
- 21 relief fund risk pool.